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## APPLICANTS

Clifford J. Finn, Wauwatosa, WI;

\*\* CONTINUING DATA \*\*\*\*\*

N/A SB

\*\* FOREIGN APPLICATIONS \*\*\*\*\*

N/A SB

IF REQUIRED, FOREIGN FILING LICENSE GRANTED \*\* SMALL ENTITY \*\*

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Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY WI	SHEETS DRAWING 5	TOTAL CLAIMS 19	INDEPENDENT CLAIMS 3
35 USC 119 (a-d) conditions: met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after				
Verified and Acknowledged	Allowance <i>[Signature]</i> Examiner's Signature	SB Initials		

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## TITLE

Multi-component fluid mix ratio check nozzle and kit

FILING FEE  RECEIVED 385	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
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